

CITY OF DAYTON INDIVIDUAL INCOME TAX RETURN

Is this Dayton Tax Return:	Single		Join	t Fil	ing
TAX ID # OR SS #					
TAX ID # OR SS #					
Your phone #					
Your Email address					
Are you a Dayton resident?			Yes		No
Did you file a Dayton Return last ye	ar?		Yes		No
Did you file on a different Tax ID# las If so, please list Tax ID#	,				
Did You Move during this tax year?			Yes		No
Old address					
Date Moved in or Date Moved Out					
If you moved more than once during the year attach					

list to tax return showing addresses and dates

TAXPAYER NAME, ADDRESS & ACCOUNT NUMBER

All supporting W-2's and Federal Schedules must be submitted with this return

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Plea	ase Complete Work Sheet On Reverse Side Before Completing Section	A			
s	ECTION A TOTAL TAXABLE INCOME				
1.	Wages, Salaries, Tips, and Other Employee Compensation-Use highest wa See Section A on back of return. (Part year residents must pro-rate their in time lived in Dayton.)	come based on	\$		
2.	Other Taxable Income or Deductions from Reverse Side		\$		
3.	Taxable Income (Add Lines 1 through 2)		\$ <u></u>		
4.	Dayton Tax Due @ 2.25% of Line 3				
5.	Payments and Credits:				
	A. Dayton Tax Withheld\$				
	B. Other City Tax Withheld				
	C. Estimated Taxes Paid/Prior Year Credit	. \$			
	D. Other Credits /Partnership Payments	. \$	OFFICE USE ONLY		
6.	Total Payments and Credits (Add Lines 5A through 5D)		\$ <u></u>		
7.	Balance of Tax Due (Line 4 minus Line 6)				
8.	Penalty \$ Interest \$				
9.	Amount Due: Make Checks Payable to City of Dayton		\$		
10.		efund \$	_		
S	ECTION B DECLARATION OF ESTIMATED TAX FOR TAX YEAR				
11.	Estimated Income Subject To Tax \$ @ 2.25% =		\$		
12.	Estimated Tax Withheld By Your Employer(s)		\$		
	Total Estimated Tax Due (Line 11 minus Line 12)				
14.	Credit From Prior Tax Year		\$		
15.	Net Estimated Tax Due (Line 13 minus Line 14)		\$		
16.	Estimated Tax Amount Due is 22.5% of Line 15 (First Payment)		\$		
17.	TOTAL AMOUNT DUE (Line 9 plus Line 16) AMOUNT ENCLOSED:		\$		
s	ECTION C VISA AND MASTER CARD PAYMENTS				
	ESTIGN S VIGA AND MASTER SAID LATMENTS				
(S	Oue to privacy issues and possible identity theft, Visa and Master Card payments will be accepted only by telephone 24 hours a day by calling 937) 333-3500. Select "Option 2" to connect to the tax system, and then press Option 1" to make a payment. To speak to a customer service representative luring normal business hours, select "Option 2" and then "Option 7."	READ BEFORE SIGNING: The undersigned declare this return and attached to be a true and complete return for the taxable year stated and that the figu herein are the same as used for Federal Tax purpose, adjusted to the require of the Dayton city tax ordinances represented by this return. I understand that am under withheld in the following tax year (by \$100.00 or 10% of tax due) I be charged an underpayment penalty if I fail to make required estimated tax payments. If this return was prepared by a tax professional, may we contact them directly? No			
X					
Tax F	Preparer Signature	Taxpayer Signature	Date		
	Preparer Phone #	Spouse Signature	Date		

SECTION D RETIRE	ED AND TAXPAYERS WITH NO	TAXABLE INC	OME CHECK AF	PROPRIA	ATE EXPLANATION(S)	
	6 By My Employer					urn.	
SECTION A TOTAL	W-2 WAGES						
Employer's Name	Work Address	Dayton tax		Other City Tax		Total Taxable Wages*	
Total Tayabla Wagaa, Bay F	is very ally but not always the hi	about avons wa	an I lan tha lawar		axable Wages		
	is usually, but not always, the hitx forms. Please provide a writt						
SECTION E OTHER	INCOME OR LOSS AND FORM	/I 2106 EXPEN	SE				
	o the IRS on each of the followings are required to be included with			Copies o	f the Federal Income	Tax Return and/or variou	IS
P	rofit and/or Loss		Profit and/or	Loss		Profit and/or Lo	SS
Schedule C	Form 47	797			Schedule K-1		
Schedule C	Form 10	099-MISC		Schedule K-1			
Schedule E Form 1099-MISC		99-MISC			Other		
Schedule E Form 1099-N		99-MISC			Other		
Total to Line 2 Total to Line 2				Total to Line 2			
Please note losses are not	deductible against W-2 wages) .					
income. IRS Schedule A is	Total to Lin required to be attached to this				from wages, subje	ct to 2% of adjusted gr	oss
			a. Loc Everyv	where	b. Located in Dayton	(b ÷ a)	Ü
Original Cost of Real and Tangible Personal Property Gross Annual Rentals Paid Multiplied by 8 Total Step 1 Total Step 1							
						%	
Gross Receipts from Sales Made and/or Work or Services Performed Wages, Salaries and Other Compensation Paid							
5. Average Percentage (To	otal Percentages/Number of Perc	entages Used)					%
Additional addresses or com	nments:						

IMPORTANT INFORMATION: MAIL RETURN WITH:

PAYMENT DUE TO: City of Dayton, Division of Revenue and Taxation, PO Box 643700, Cincinnati, OH 45264-3700

NON-PAYMENT OR ZERO BALANCE DUE TO: City of Dayton, Division of Revenue and Taxation, PO Box 7999, Akron, OH 44306-0999

REFUND REQUEST TO: City of Dayton, Division of Revenue and Taxation, PO Box 7999, Akron, OH 44306-0999

Completed tax returns will be accepted through the Fax as an original document. All necessary information and attachments must be included. Income tax preparation service will be provided only to those households earning \$35,000 or less. In the event your check is returned unpaid for insufficient funds or uncollected funds, we may electronically debit your account for the principal amount of the check. A return check fee, currently \$25.00, as set forth by the Director of Finance, will be assessed.

Online tax preparation tool: http://www.cityofdaytontax.org Forms are available at www.daytonohio.gov Forms line 937-333-3501, Fax Number 937-333-4280, E-mail for forms: taxforms@daytonohio.gov Forms Available: Office Hours: Monday through Friday 8:00 AM to 5:00 PM City Hall, First Floor Lobby, 101 W Third St. Dayton, Oh 45402